POCITION	INITIALS	ID NO.	DATE
			0.4
FEE DE (ERMINATION	2		02,09-
O.I.P.E. CLASSIFIER		3.20	7/17
FORMALITY REVIEW	Ch	1115	08.22.00
RESPONSE FORMALITY REVIEW	<b>JK</b>	835	11/06/01

## **INDEX OF CLAIMS**

V	Rejected	N	Non-elected
	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

- (Inrough numeral) Canceled A						
Claim	Date	Claim D	ate	Claim	Date	
Final Conginal Confidence Confide		Final		Final 10 Original		
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36	++++	86	++++	136	<del>                                     </del>	
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If mor than 150 claims or 10 actions staple additional sheet here

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